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Report about the medical examination
of H.H.The Yuvaraja of Mysore.

When I saw H.H. for the first time on Febr., 17th 1940, and on the subsequent days, he was in a state of a rather severe Cardiac decompensation. Breathless after the slightest effort, slightly cyanotic, pulse rate in rest about 94, oedema in both legs. The limits of the heart were; median line-left border 4.85 inches, to the right 1.6 ins. aorta 4 inches. pulse, on the 18th, in lying, after 10 min.rest 98, respiration 36. Heart sounds regular, but definite gallop rhythm, and slight systolic murmur over the apex. Blood pressure 118/62. Pulse relatively good, equal on both wrists. Liver, (especially the left lobe) 5 inches below the costal margin, rather hard, with a smooth margin. Accumulation of very much gas in the abdomen, but some ascites present too. Oedema in both legs, round the ankles,in the calves. Muc.membrances rather pale.

After having studied the records of H.H's case carefully, and after my examination, I came to the conclusion that, as has been pointed out before, by many other Doctors, H.H. is suffering from a severe myocardial insufficiency, combined with an anemia. (See report about the blood count, taken by Dr.Rao on the 17th of this month and the previous reports.

I consider that complete rest and a proper diet are absolutely essential for H.H. nearly more important than the medicine itself. I tried to explain to H.H. of which enormous importance, complete rest is, to give the heart

relieve from the continuous overstrain which is present necessarily when the patient is standing or even sitting. The strain on the circulation being much less in lying position, as then the heart has to pump the blood only to practically the same level. I told H.H. that, although I see no immediate danger, the heart may get considerably weaker, possibly very soon, and that an efficient treatment cannot be carried out as long as the patient is up. On the other hand, with complete rest for 4 weeks and the necessary after-care, combined with diet and treatment, the condition will be improved to an enormous extent. If H.H. can manage to have during the 4 week's initial treatment complete 24 h rest and the prescribed diet, one can promise, with another 4 week's milder after treatment with only partial rest, disappearance of the decompensation of the heart, considerable improvement of the anemia, so that H.H., under continuous medical care will be able to resume the activities of a normal,not too strenuous and strictly regulated life.

Sd. A.H.Stern

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